

#### CENTER FOR HEALTHCARE EDUCATION AND STUDIES

## BREAST CANCER STUDY 1997 PATIENT SURVEY

### SUMMARY OF DATA EXTRACTED FROM PATIENTS' MEDICAL RECORDS

**RP 00-002** 

**MAY 2000** 

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UNITED STATES ARMY
MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6125

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### BREAST CANCER STUDY 1997 PATIENT SURVEY

## SUMMARY OF DATA EXTRACTED FROM PATIENTS' MEDICAL RECORDS

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#### INTRODUCTION

In 1997, the AMEDD Studies and Analysis Branch in the Center for Healthcare Education and Studies (CHES), US Army Medical Department Center and School, began a study entitled "Enhancing the DOD Automated Central Tumor Registry (ACTUR) Data to Develop More Precise Measures for Survival Analysis and Epidemiological Studies of Breast Cancer Patients." The first phase of the investigation was a mail survey of all breast cancer patients registered in the Brooke Army Medical Center (BAMC) Tumor Registry who met the following criteria: the patient was a female diagnosed and/or treated for breast cancer at BAMC whose cancer was initially diagnosed in the period 1987-1997. Details of the survey methodology and initial findings were summarized in a previous report. The second phase of the study was the extraction and analysis of data from medical records of the surveyed patients and is the subject of the current report. Later phases of the study, based on the merger of the survey and medical data with records from the ACTUR database, will be presented in future reports.

#### **METHOD**

As discussed in a previous report, a study population representing 96% of those surveyed, was retained for analysis. The study group (n=907) consisted of white, African American, and Hispanic women diagnosed and/or treated for breast cancer at BAMC, whose cancer was initially diagnosed in the period 1987-1997. At the time of the survey, 71% of the women were living (n=644), 29% were dead (n=258). By race, 714 were white (516 living, 198 dead), 121 were African American (77 living, 44 dead), and 67 were Hispanic (51 living, 16 dead).

A data collection form for recording the medical data on each of the surveyed patients was designed and evaluated. At the time the form was designed and printed, it was envisioned that most, if not all, of the data would be obtained from laboratory records and the form was given the title "Laboratory Collection Sheet" (See Appendix 1). However, once work was underway, it was found that the designated information was frequently not in the lab reports, but in other medical records. Therefore, hereafter any reference to the form or the extracted data will use the broader conotation "medical," not "lab."

The medical data forms were labeled with the patients' names and survey id numbers prior to fill-in of data. All forms were then completed by Certified Tumor Registrars (CTRs) from screening of BAMC medical registry records. Data collected included:

- a. Estrogen receptor assay--whether positive, negative or unknown.
- b. Progesterone receptor assay--whether positive, negative or unknown.
- c. Cell type to include infiltrating duct (or intraductal), ductal, inflammatory, Paget's disease, lobular, adenocarcinoma, medullary, tubular, papillary, cystosarcoma (phyllodes tumor), mucinous, cribiform lymphoma, spindle cell or unknown.
- d. Tumor size in centimeters (for staging of the cancer using the TNM system required by accrediting agencies--this is the T portion).

- e. Nodal involvement--how many nodes were examined and of that number, how many nodes were positive (this is the N portion of the TNM system).
  - f. Metastatic stage (had the cancer spread to adjoining organs or to distant organs).
  - g. Stage (final or M category of the TNM system).
- h. Adjuvant therapy administered to include tamoxifen, CMF, FAC, bone marrow transplant + harvest, Taxol, GCSF, 5-FU, adriamycin, cytoxan, methotrexate, none or unknown.
  - i. Radiation therapy administered to include palliative, curative, none or unknown.
  - j. Type of surgery to include lumpectomy, modified radical, implants, none, or unknown.
  - k. Breast location of the cancer, to include right, left, bilateral or unknown.
- 1. Previous primary--yes, no or unknown. (Note: If a woman had two occurrences of primary breast cancer during the study period, information on both incidences was extracted, and one record was created for each occurrence.)
  - m. Transfer of patient from another installation (using the American Hospital number).

After filling-in of the medical data forms was completed, Branch staff coded all data in preparation for digitization. Records for patients with only one occurrence of primary breast cancer during the study period, were coded "primary 1." For patients with two occurrences, the record with the earlier diagnosis date was coded as "primary 1," and the other record as "primary 2." Data entry and verification of the records were performed by a local vendor. The vendor provided a diskette containing a text file of the data plus an explanation of the file layout. After receipt of the diskette, Branch staff initially read and reviewed the text file on a PC for any problems noted by the data entry vendor and to check the general layout of the file. The text file was then transferred to a Unix workstation for conversion to a SAS data file (lab.ssd01). SAS formats and labels were created and stored for the medical data variables and preliminary summary analyses run to obtain initial information. A racial variable for the women in the study population was obtained from the ACTUR database and merged with the medical data file (output SAS data set: newmed1.ssd01, 907 observations, 42 variables). Frequency distributions were generated for each of the variables (except identification variables such as patient name and survey id number), and the effect of race examined using Chi-square analysis. Appendix 2 is an alphabetical listing of all variables with their SAS attributes from . Appendix 3 contains the SAS formats which define the coded, numeric values of the categorical variables.

#### RESULTS AND DISCUSSION

Notes: Results are presented for "primary 1" records only. All percentages shown in the tables are column percentages (e.g., in Table 1, 44.09% of whites had breast cancer only in the right breast). Results are presented for all Chi-square tests that were performed, even if the test may have been invalid. A superscript letter (a,b,c,d,e,f) next to a Chi-square probability identifies the tests which may be invalid; the letter indicates the percentage of cells in the cross-tabulation having expected counts less than 5: a = 21-25%, b = 26-35%, c = 36-45%, d = 46-55%, e = 56-65%, f > 65%.

#### Breast Location and TNM Staging Components (Table 1)

Breast location of the cancer did not differ by race. About 91% of all women had cancer in only one breast, with right and left occurrences about equal. The remaining 9% of women either had cancer in both breasts or no indication of location was found in the medical records. Concerning the three factors of TNM Staging (tumor size, node category, and metastasis status), only tumor size varied significantly by race. Whites had the largest proportion of T1 cancers (43%) and the smallest proportion of T4 cancers (5%). African Americans had the least Tis (5%) and the most T2, while Hispanics suffered the least T3 cancers.

Table 1. Breast location and TNM staging components by race.

Variable	Wh No.	ite (%)	African No.	American (%)	His No.	panic (%)	To No.	tal (%)	P*>X2
									0.205
Breast Location	317	(44.09)	56	(46.28)	33	(49.25)	406	(44.76)	
Right Left	329	(45.76)		(45.45)		(46.27)	415	(45.76)	
Bilateral	38	(5.29)	1	(0.83)	1	(1.49)	40	(4.41)	
Unknown	35	(4.87)	9	(7.44)	2	(2.99)	46	(5.07)	
Tumor Size <sup>†</sup>									0.003
Tis	99	(13.77)	6	(4.96)	8	(11.94)	113	(12.46)	
T1	307	(42.70)	41	(33.88)	23	(34.33)	371	(40.90)	
T2	187	(26.01)	44	(36.36)	21	(31.34)	252	(27.78)	
T3	47	(6.54)	8	(6.61)	2	(2.99)	57	(6.28)	
T4	37	(5.15)	14	(11.57)	9	(13.43)	60	(6.62)	
Unknown	42	(5.84)	8	(6.61)	4	(5.97)	54	(5.95)	
Node Category <sup>†</sup>									0.198 <sup>d</sup>
NO	439	(61.06)	60	(49.59)	33	(49.25)	532	(58.65)	
N1	245	(34.08)	56	(46.28)	31	(46.27)	332	(36.60)	
N2	5	(0.70)	0	(0.00)	0	(0.00)	5	(0.55)	
N3	1	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	
Unknown	29	(4.03)	5	(4.13)	3	(4.48)	37	(4.08)	
Metastasis Status <sup>†</sup>									0.977 <sup>a</sup>
M0	649	(90.26)	110	(90.91)	59	(88.06)	818	(90.19)	
M1	36	(5.01)	6	(4.96)	4	(5.97)	46	<b>(5.</b> 07)	
Unknown	34	(4.73)	5		4	(5.97)	43	(4.74)	

A superscript letter (a,b,c,d,e,f) next to a Chi-square probability identifies the tests which may be invalid; the letter indicates the percentage of cells in the cross-tabulation having expected counts less than 5: a = 21-25%, b = 26-35%, c = 36-45%, d = 46-55%, e = 56-65%, f > 65%.

#### Pathologic Stage, Tumor Cell Type, and Estrogen/Progesterone Receptor Status (Table 2)

Pathologic stage varied significantly with race, with more whites having stages 0 and I, more African Americans and Hispanics having stage II, more African Americans having stage III and more Hispanics having stage IV. Tumor cell type showed no significant differences by race, but the Chi-square test was probably not valid due to the large number of small cell counts.

TNM staging from American Cancer Society textbook of clinical oncology, 2nd ed. Murphy GP, Lawrence W, Jr, Lenhard RE, Jr, editors. Atlanta: The American Cancer Society, 1995.

However, note that in the predominant category, infiltrating duct, African Americans have a 10% higher occurrence rate compared to whites and Hispanics (80% vs 71% and 70%). Estrogen receptor status showed a highly significant difference by race. More than 50% of white and Hispanic women had positive assays compared to only 37% of African American women. Progesterone receptor status did not vary with race; overall, about 40% of women had positive assays and 28% had negative assays.

Table 2. Pathologic stage, tumor cell type, and estrogen/progesterone receptor status by race.

	W	hite		American		spanic		otal	_*
Variable	No.	(%)	No.	(%)	No	. (%)	No.	(%)	P*>X2
Pathologic Stage									0.048
0	86	(11.96)	5	(4.13)	7	(10.45)	98	(10.80)	
I	234	(32.55)	32	(26.45)	15	(22.39)	281	(30.98)	
II	254	(35.33)	48	(39.67)	27	(40.30)	329	(36.27)	
III	73	(10.15)	23	(19.01)	9	(13.43)	105	(11.58)	
īV	49	(6.82)	8	(6.61)	7	(10.45)	64	(7.06)	
Unknown	23	(3.20)	5	(4.13)	2	(2.99)	30	(3.31)	
Tumor Cell Type						***			0.459 <sup>f</sup>
Infiltrating duct	508	(70.65)	97	(80.17)	47	(70.15)	652	(71.89)	
Ductal	65	(9.04)	4	(3.31)	6	(8.96)	75	(8.27)	
Inflammatory	10	(1.39)	2	(1.65)	3	(4.48)	15	(1.65)	
Paget's disease	2	(0.28)	0	(0.00)	0	(0.00)	2	(0.22)	
Lobular	51	(7.09)	4	(3.31)	2	(2.99)	57	(6.28)	
Adenocarcinoma	25	(3.48)	3	(2.48)	5	(7.46)	33	(3.64)	
Medullary	7	(0.97)	4	(3.31)	0	(0.00)	11	(1.21)	
Tubular	10	(1.39)	0	(0.00)	0	(0.00)	10	(1.10)	
Papillary	18	(2.50)	4	(3.31)	3	(4.48)	25	(2.76)	
Cystosarcoma	3	(0.42)	1	(0.83)	0	(0.00)	4	(0.44)	
Cribiform	1	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	
Lymphoma	4	(0.56)	0	(0.00)	0	(0.00)	4	(0.44)	
Spindle cell	1	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	
Unknown	13	(1.81)	2	(1.65)	1	(1.49)	16	(1.76)	
Missing	1	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	
Estrogen Receptor Status									0.001
Negative	128	(17.80)	42	(34.71)	14		184	•	
Positive	369	(51.32)	45	(37.19)	37	(55.22)	451	(49.72)	
Unknown	222	(30.88)	34	(28.10)	16	(23.88)	272	(29.99)	
Progesterone Receptor Sta	tus								0.134ª
Negative	187	(26.01)	46	(38.02)	24	•	257	(28.34)	
Positive	294	(40.89)	40	(33.06)	25	(37.31)	359	(39.58)	
Unknown	237	(32.96)	35	(28.93)	18	(26.87)	290	(31.97)	
Missing	1	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	

A superscript letter (a,b,c,d,e,f) next to a Chi-square probability identifies the tests which may be invalid; the letter indicates the percentage of cells in the cross-tabulation having expected counts less than 5: a = 21-25%, b = 26-35%, c = 36-45%, d = 46-55%, e = 56-65%, f > 65%.

#### Treatments (Surgery, Radiation Therapy, Adjuvant Therapies) (Tables 3 and 4)

Surgery across the three racial groups was equivalent under the military health care system. Overall, approximately 63% of women had modified radical mastectomies, 22% had lumpectomies, 8% had implants, and only 3% had no surgery. Even though radiation therapy was found to vary significantly with race, a similar pattern in curative versus pallative treatment was observed, with 3-4 times as many women having had curative compared to pallative radiation therapy.

Table 3. Surgery and radiation therapy by race.

	Whit			American	His No.	panic (%)	To No.		P*>X²
Variable	No.	(%)	No.	(%)	NO.	(70)	110.	(70)	
Type of Surgery									0.932⁵
Lumpectomy	157 (	(21.84)	29	(23.97)	14	(20.90)	200	(22.05)	
Mod radical		63.70)	76	(62.81)	42	(62.69)	576	(63.51)	
Implants	59	(8.21)	6	(4.96)	6	(8.96)	71	(7.83)	
None	20	(2.78)	5	(4.13)	3	(4.48)	28	(3.09)	
Unknown	25	(3.48)	5	(4.13)	2	(2.99)	32	(3.53)	
Radiation Therapy									0.028
Pallative	60	(8.34)	13	(10.74)	7	(10.45)	80	(8.82)	
Curative		(31.71)	40	(33.06)	18	(26.87)	286	(31.53)	
None		(51.32)	49	(40.50)	29	(43.28)	447	(49.28)	
Unknown	58	(8.07)	19	(15.70)	12	(17.91)	89	(9.81)	
Missing	4	(0.56)	0	(0.00)	1	(1.49)	5	(0.55)	

<sup>\*</sup>A superscript letter (a,b,c,d,e,f) next to a Chi-square probability identifies the tests which may be invalid; the letter indicates the percentage of cells in the cross-tabulation having expected counts less than 5: a = 21-25%, b = 26-35%, c = 36-45%, d = 46-55%, e = 56-65%, f > 65%.

There was noticeable variation in the adjuvant therapies for women in the three racial groups. Approximately 29% of white women received no adjuvant therapy compared with 18% of Hispanics and 13% of African Americans. Overall and by race, the most common adjuvant therapies for women in the military health care system were (a) tamoxifen; (b) fluorouracil, doxorubicin (adriamycin), and cyclophosphamide regimen (FAC); and (c) cyclophosphamide, methotrexate, and fluorouracil regimen (CMF). However, the distribution of these therapies varied by race. For white women, the therapies in order of use (Admin 1) were Tamoxifen (26%), FAC (17%), and (CMF) (13%); for African Americans, FAC (27%), CMF (20%), and Tamoxifen (17%); and for Hispanics, FAC (25%), Tamoxifen (19%), and CMF (16%). Two adjuvant therapies were administered to 31% of whites compared to 46% of African Americans and 48% of Hispanics. If a second adjuvant therapy was given, Tamoxifen was most common for whites and Hispanics compared to Cytoxan for African Americans. Three adjuvant therapies were administered to 16.1% of whites, 19% of Hispanics, and 20% of African Americans. Less than 8% of women in each racial group had more than three adjuvant therapies.

Table 4. Adjuvant therapy by race.

		nite		American		spanic (%)		otal (%)	P <sup>†</sup> >X <sup>2</sup>
Variable*	No.	(%)	No.	(%)	No.	(%)	No.	(%)	
Adjuvant Therapy Admin 1									0.001 <sup>d</sup>
Tamoxifen	185	(25.73)	20	(16.53)	13			(24.04)	
CMF	95	(13.21)	24	(19.83)	11	(16.42)	130	(14.33)	
FAC	124	(17.25)	33	(27.27)	17	(25.37)		(19.18)	
BMT + harvest	12	(1.67)	0	(0.00)	1	(1.49)	13	(1.43)	
Taxol	9	(1.25)	1	(0.83)	0	(0.00)	10	(1.10)	
GCSF	3	(0.42)	1	(0.83)	0	(0.00)	4	(0.44)	
5 FU	5	(0.70)	0	(0.00)	0	(0.00)	5	(0.55)	
Adriamycin	34	(4.73)	18	(14.88)	9	(13.43)	61	(6.73)	
Cytoxan	13	(1.81)	3	(2.48)	1	(1.49)	17	(1.87)	
Methotrexate	0	(0.00)	1	(0.83)	0	(0.00)	1	(0.11)	
None	209	(29.07)	16	(13.22)	12	(17.91)	237	(26.13)	
Unknown	30	(4.17)	4	(3.31)	3	(4.48)	37	(4.08)	
Adjuvant Therapy Admin 2									0.007 <sup>e</sup>
Tamoxifen	78	(10.85)	10	(8.26)	11	(16.42)	99	(10.92)	
CMF	18	(2.50)	2	(1.65)	2	(2.99)	22	(2.43)	
FAC	26	(3.62)	10	(8.26)	4	(5.97)	40	(4.41)	
BMT + harvest	13	(1.81)	3	(2.48)	1	(1.49)	17	(1.87)	
Taxol	25	(3.48)	7	(5.79)	4	(5.97)	36	(3.97)	
GCSF	10	(1.39)	1	(0.83)	2	(2.99)	13	(1.43)	
5 FU	3	(0.42)	1	(0.83)	0	(0.00)	4	(0.44)	
Adriamycin	12	(1.67)	4	(3.31)	0	(0.00)	16	(1.76)	
Cytoxan	34	(4.73)	18	(14.88)	8	(11.94)	60	(6.62)	
Methotrexate	2	(0.28)	0	(0.00)	0	(0.00)	2	(0.22)	
None	1	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	
Missing	497	(69.12)	65	( <del>5</del> 3.72)	35	(52.24)	597	(65.82)	
Adjuvant Therapy Admin 3				4					0.001e
Tamoxifen	28	(3.89)	10	(8.26)	4	(5.97)	42	(4.63)	
CMF	3	(0.42)	0	(0.00)	0	(0.00)	3	(0.33)	
FAC	12	(1.67)	3	(2.48)	Õ	(0.00)	15	(1.65)	
	28	(3.89)	2	(1.65)	7	(10.45)	37	(4.08)	
BMT + harvest	27	(3.76)	1	(0.83)	1	(1.49)	29	(3.20)	
Taxol	3	(0.42)	5	(4.13)	Ō	(0.00)	8	(0.88)	
GCSF	3	(0.42)	3	(4.13)	U	(0.00)	U	(0.00)	
5 FU	4	(0.14)	2	(1.65)	1	(1.49)	4	(0.44)	
Adriamycin	1	(0.14)	2	(1.65)	1	(0.00)	2	(0.77)	
Cytoxan	2	(0.28)	0	(0.00)		• •	13	(1.43)	
Methotrexate	12	(1.67)	1	(0.83)	0	(0.00)			
None	2	(0.28)	0	(0.00)	0 54	(0.00) (80.60)	2 752	(0.22) (82.91)	
Missing	601	(83.59)	97	(80.17)		(00.00)			

 $<sup>^{\</sup>circ}$ CMF= cyclophosphamide, methotrexate, fluorouracil regimen; FAC= fluorouracil, doxorubicin (adriamycin), cyclophosphamide regimen;, BMT=bone marrow transplant; GCSF= granulocyte colony-stimulating factor (filgrastim); 5 FU= 5-fluorouracil. A superscript letter (a,b,c,d,e,f) next to a Chi-square probability identifies the tests which may be invalid; the letter indicates the percentage of cells in the cross-tabulation having expected counts less than 5: a = 21-25%, b = 26-35%, c = 36-45%, d = 46-55%, e = 56-65%, f > 65%.

Table 4. Adjuvant therapy by race. (cont.)

Table 4. Adjuvant diciapy	Wh		African	American	His	panic	To	tal	
Variable	No.	(%)		(%)	No.	(%)	No.	(%)	P>X <sup>2</sup>
									0.175ª
Adjuvant Therapy Admin 4	12	(1.67)	1	(0.83)	2	(2.99)	15	(1.65)	
Tamoxifen	1	(0.14)	Ō	(0.00)	ō	(0.00)	1	(0.11)	
CMF	-	(0.14)	0	(0.00)	0	(0.00)	1	(0.11)	
FAC	1		2	(1.65)	1	(1.49)	25	(2.76)	
BMT + harvest	22	(3.06)	2	(1.65)	Ō	(0.00)	8	(0.88)	
Taxol	6	(0.83)	3	(2.48)	0	(0.00)	5	(0.55)	
GCSF	2	(0.28)	_		0	(0.00)	1	(0.11)	
5 FU	1	(0.14)	0	(0.00)	_	(1.49)	2	(0.22)	
Adriamycin	0	(0.00)	1	(0.83)	1	•	3	(0.33)	
Cytoxan	3	(0.42)	0	(0.00)	0	(0.00)		(93.27)	
Missing	671	(93.32)	112	(92.56)	63	(94.03)	846	(93.27)	
Adjuvant Therapy Admin 5									0.860°
Tamoxifen	1	(0.14)	1	(0.83)	0	(0.00)	2	(0.22)	
BMT + harvest	4	(0.56)	1	(0.83)	0	(0.00)	5	(0.55)	
GCSF	3	(0.42)	0	(0.00)	0	(0.00)	3	(0.33)	
5 FU	1	(0.14)	Ö	(0.00)	0	(0.00)	1	(0.11)	
Missing	710	(98.75)	119	(98.35)		(100.00)	896	(98.79)	
Missing	, 10	(30.73)		(55.55)	•	,		•	0 EE3d
Adjuvant Therapy Admin 6				40.00	_	(0.00)	•	(0.22)	0.553 <sup>d</sup>
BMT + harvest	2	(0.28)	1	(0.83)	0	(0.00)	3	(0.33)	
Missing	717	(99.72)	120	(99.17)	67	(100.00)	904	(99.67)	

<sup>\*</sup>CMF= cyclophosphamide, methotrexate, fluorouracil regimen; FAC= fluorouracil, doxorubicin (adriamycin), cyclophosphamide regimen;, BMT=bone marrow transplant; GCSF= granulocyte colony-stimulating factor (filgrastim); 5 FU= 5-fluorouracil.

A superscript letter (a,b,c,d,e,f) next to a Chi-square probability identifies the tests which may be invalid; the letter indicates the percentage of cells in the cross-tabulation having expected counts less than 5: a = 21-25%, b = 26-35%, c = 36-45%, d = 46-55%, e = 56-65%, f > 65%.

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#### APPENDIX 1

### LABORATORY COLLECTION SHEET

#### LABORATORY COLLECTION SHEET

Patient NameLast		V/T
Lasi	First	MI
Sponsor Social Security Number		
1. ER'PR Receptor status of tumor		
2. Tumor histology (size, nodal status,	differentiation, etc.)	
3. Adjuvant therapy administered		
4. Radiation therapy administered.		
5. Type of surgery.		
modified radical		
breast conservation Additional remarks.		

#### **APPENDIX 2**

# ALPHABETIC LIST OF VARIABLES IN THE SAS MEDICAL DATA SET

Appendix 2. Alphabetic List of Variables in the SAS Medical Data Set\*

	#	Туре	Len	Pos	Format	Label
Variable				253	ADJVFMT.	#1 Adjuvant Therpy Admin
0ADJUV1	3	Num	8	253 261	ADJVFMT.	#2 Adjuvant Therpy Admin
1ADJUV2	3	Num	8	269	ADJVFMT.	#3 Adjuvant Therpy Admin
2ADJUV3	3	Num	8	269 277	ADJVFMT.	#4 Adjuvant Therpy Admin
ADJUV4	33	Num	8	285	ADJVFMT.	#5 Adjuvant Therpy Admin
ADJUV5	34	Num	8		ADJVFMT.	#6 Adjuvant Therpy Admin
ADJUV6	35	Num	8	293	ADJVFMT.	2nd Prim #1 Adjuv ther admin
ADJUV12	11	Num	8	102		2nd Prim #1 Adjuv ther admin
ADJUV22	12	Num	8	110	ADJVFMT.	2nd Prim #2 Adjuv ther admin
ADJUV32	13	Num	8	118	ADJVFMT.	2nd Prim #3 Adjuv ther admin
ADJUV42	14	Num	8	126	ADJVFMT.	-
ADJUV52	15	Num	8	134	ADJVFMT.	2nd Prim #5 Adjuv ther admin
ADJUV62	16	Num	8	142	ADJVFMT.	2nd Prim #6 Adjuv ther admin
BRLOC	38	Num	8	317	BRLOCFMT.	Breast Location
BRLOC2	19	Num	8	166	BRLOCFMT.	Breast Location-#2
CELLTYP2	6	Num	8	62	CELLFMT.	Tumor Cell Type-#2
CELLTYPE	25	Num	8	213	CELLFMT.	Tumor Cell Type
ERA	23	Num	8	197	RCPTRFMT.	Estrogen Receptor Status
ERA2	4	Num	8	46	RCPTRFMT.	Estrogen Receptor Stat-#2
ETHN	42	Num	8	348		Ethnicity- W H B
ETHNN	43	Num	8	356		Ethnicity- W B H
MSTAT	28	Num	8	237	MSTATFMT.	Metastasis Status
MSTAT2	9	Num	8	86	MSTATFMT.	Metastasis Status-#2
NODECAT	27	Num	8	229	NODEFMT.	Node Category
NODECAT2	8	Num	8	78	NODEFMT.	Node Category-#2
OTHRCN22	20	Num	8	174		
OTHRCNC2	40	Num	8	332		Previous Primary-#2
PRA	24	Num	8	205	RCPTRFMT.	Progest. Receptor Status
PRA2	5	Num	8	54	RCPTRFMT.	Progest. Receptor Stat-#2
PRIMN	22	Num	8	189		# Breast Primaries
PRIMN2	41	Num	8	340		
PRIMN2Z	3	Num	7	39		Secendary Breast Primary
PTID	2	Char	36	3		Patient ID number
RADIOTH	36	Num	8	301	RADIOFMT.	Radiation Therapy
RADIOTH2	17	Num	8	150	RADIOFMT.	Radiation Therapy-#2
SID	1	Char	3	0		Survey ID number
STAGEP	29	Num	8	245	PATHFMT.	Pathologic Stage
STAGEP2	10	Num	8	94	PATHFMT.	Pathologic Stage-#2
SURGTYP2	18	Num	8	158		Type of Surgery-#2
SURGTYPE	37	Num	8	309	SURGLFMT.	Type of Surgery
	39	Char	7	325	\$AHACDFM.	Transfer AHA Hosp Code
TRANSFER	21	Char	7	182	φ	Transfer AHA Hosp Code-#2
TRANSFR2		Num	8	221	TSIZEFMT.	Tumor Size
TSIZE	26 7	Num	8	70	TSIZEFMT.	Tumor Size-#2
TSIZE2	,	Num	U	70	, 522	

<sup>\*</sup>Output from the SAS System Proc CONTENTS (June 30, 2000).

#### DEPARTMENT OF THE ARMY

ACADEMY OF HEALTH SCIENCES, UNITED STATES ARMY FORT SAM HOUSTON, TEXAS 78234-6100

8 August 2000

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KAY D. LIVINGSTON

Librarian

DTIC Account No. 25782

Kay D. Livingston

#### APPENDIX 3

# SAS FORMATS WHICH DEFINE NUMERIC VALUES OF CATEGORICAL VARIABLES

FORMAT NAME: <u>ADJVFMT</u>	LENGTH: 13 NUMBER OF VALUES: 12
ISTART   END	LABEL (VER. 6.11
1   2   3   4   5   6   7   8   9   10   11   99	1 Tamoxifen 2 CMF 3 FAC 4 BMT + harvest 5 Taxol 6 GCSF 7 5 FU 8 Adriamycin 9 Cytoxan 10 Methotrexate 11 None 99 Unknown

	FORMAT NAME: <u>BRLOCFMT</u>	LENGTH: 9 NUMBER OF	VALUES: 4
START	END	LABEL (VER. 6.11	14JUN00:14:43:26)
	1  2  3  9	1 Right 2 Left 3 Bilateral 9 Unknown	

	FORMAT NAME: <u>CELLFMT</u>	LENGTH: 14 NUMBER OF VALUES: 15
START	END	
	1  2  3  4  5  6  7  8  9  10  11  12  13  14  99	1 Infilt duct 2 Ductal 3 Inflammatory 4 Paget's diseas 5 Lobular 6 Adenocarcinoma 7 Medullary 8 Tubular 9 Papillary 10 Cystosarcoma 11 Mucinous ca 12 Cribiform 13 Lymphoma 14 Spindle cell 99 Unknown

	FORMAT NAME: MSTATEMT	LENGTH: 15 NUMBER OF VALUES: 3
START	END	LABEL (VER. 6.11 14JUN00:14:43:26)
	0  1  9	0 No distant mets 1 Distant mets 9 Unknown

į	FORMAT NAME: <u>NODEFMT</u>	LENGTH: 37 NUMBER OF VALUES: 5
START	Į END	LABEL (VER. 6.11 14JUN00:14:43:26)
	0  1  2  3  9	<pre>0 No regional lymph node mets 1 Mets to movabl.ipsil.axil lymph nodes 2 Mets to ipsil.axil nodes fix. to othr 3 Mets to ipsil.int. mamm node structur 9 Unknown</pre>

	FORMAT NAME: OTHRZCNC	LENGTH:	7	NUMBER OF	VALUES:	3	
START	END	LABEL	()	/ER. 6.11	14JUN00	:14:43:26)	
	1  2  9	1 Yes 2 No 9 Unknow	/n				    

	FORMAT NAME: <u>PATHEMT</u>	LENGTH: 9 NUMBER OF VALUES: 6
START	END	LABEL (VER. 6.11
	0  1  2  3  4  9	<pre>0 Stage 0 1 Stage I 2 Stage II 3 Stage III 4 Stage IV 9 Unknown</pre>

	FORMAT NAME: PRIMNE	LENGTH: 17 NUMBER OF VALUES: 2	1
ISTART	END	LABEL (VER. 6.11 14JUN00:14:43:26)	    -
	1  2	1 Breast primary 2 Secondary primary	-

	FORMAT NAME: <u>RACEN</u>	LENGTH: 8 NUMBER OF VALUES: 3
ISTART	END	LABEL (VER. 6.11
	1   2   3	1 White 2 Black 3 Hispanic

	FORMAT NAME: <u>RADIOFMT</u>	LENGTH: 9 NUMBER OF VALUES: 4
ISTART	END	LABEL (VER. 6.11
	1  2  3  9	1 Pallative 2 Curative 3 None 9 Unknown

!	FORMAT NAME: RCPTRFMT	LENGTH: 8 NUMBER OF VALUES: 3
  START	END	LABEL (VER. 6.11
	0  1  9	0 Negitive 1 Positive 9 Unknown

	FORMAT NAME: <u>SURGLEMT</u>	LENGTH: 11 NUMBER OF VALUES: 5
START	END	LABEL (VER. 6.11
	1  2  3  4  9	1 Lumpectomy 2 Mod radical 3 Implants 4 None 9 Unknown

FOR	RMAT NAME: <u>TSIZEF</u> N	1T LENGTH: 22 NUMBER OF VALUES: 6
  START	END	LABEL (VER. 6.11 14JUN00:14:43:26)
	0  1  2  3  4  9	<pre>0 In situ 1 2 cm or less 2 &gt; 2 cm but not &gt; 5 cm 3 &gt; 5cm 4 Any w/ext ch.wall/skin 9 Unknown</pre>

!	FORMAT	NAME:	\$AHACDFM	LENGTH: 26 NUMBER OF VALUES: 129
START		EN[	)	LABEL (VER. 6.11 14JUN00:14:43:26)
  611038  612035  614093  615009  616049  621399  621440  621530  622031  622031  632031  632036  632039	5505570000500	611  612  614  615  621  621  622  622  623  633  632	10385 20355 40935 50090 50495 13995 14407 15300 20310 32310 10015 20360 20390	Loring AFB USAF Hosp  Pease AFB USAF Hosp  Cutler Ar Com Hosp  Newport Naval Hosp  Groton Naval Hosp  Plattsburgh AFB USAF Hosp  Griffiss AFB USAF Hosp  Keller Ar Com Hosp  Walson Ar Com Hosp  Patterson Ar Com Hosp  Philadelphia Naval Hosp  Dover AFB USAF Hosp  Bethesda Naval Hosp  Malcomb Grow Med Cen  Kimbrough Ar Com Hosp
632071  633026  633333	0 0	632  633	20710 30260 33333	Patuxent Riv. NAS Nav.Hosp  Walter Reed Ar Med Cen  Armed Forces Inst of Path.

FORMA	T NAME: <u>\$AHACDFM</u> I	ENGTH: 26 NUMBER OF VALUES:	129
START	END	LABEL	(CONT'D)
6340090	16340090	Kenner Ar Com Hosp	
6340240	16340240	Dewitt Ar Com Hosp	
6340250	6340250	McDonald Ar Com Hosp	
6340335	6340335	Langley AFB USAF Hosp	
6340750	6340750	Portsmouth NS Naval Hosp	
6360250	6360250	Camp Lejeune Naval Hosp	
6360345	6360345	Cherry Point MCAS Nav.Hosp	
6360530	6360530	Womack Ar Com Hosp	
6360627	6360627	Seymour-Johnson AFB USAF H	
6370055	6370055	Beaufort MCAS Naval Hosp	
6370280	6370280	Moncrief Ar Com Hosp	
6370480	6370480	Myrtle Beach AFB USAF Hosp	
6370490	6370490	[Charleston NS Naval Hosp	
6370645	6370645	Shaw AFB USAF Reg Hosp	
6380375	6380375	Eisenhower Ar Med Cen	
6380378	i6380378	Winn Ar Com Hosp	
6380580	6380580	Martin Ar Com Hosp	
6380770	6380770	Robins AFB USAF Hosp	
6381195	6381195	Moody AFB USAF Hosp	
6390096	6390096	Patrick AFB USAF Hosp	
6390303	6390303	Homestead AFB USAF Hosp	
6390410	6390410	Jacksonville NAS Nav. Hosp	
6390715	6390715	Orlando NTC Naval Hosp	
6390790	6390790	Tyndall AFB USAF Hosp	
6390840	6390840	Pensacola NAS Naval Hosp	
6391102	6391102	MacDill AFB USAF Reg Hosp	
6391118	6391118	  Eglin AFB USAF Reg Hosp	
6411218	6411218	Wright-Patterson Med Cen	
6420385	6420385	Hawley Ar Com Hosp	
6430205	16430205	Scott Med Cen	
6431820	16431820	Great Lakes NTC Naval Hosp	
6432720	6432720	Chanute AFB USAF Hosp	
16441535	6441535	[K.I. Sawyer AFB USAF Hosp	
16442015	6442015	Wurtsmith AFB USAF Hosp	
6510175	6510175	Blanchfield Ar Com Hosp	
6510180	6510180	Ireland Ar Com Hosp	
16520840	16520840	Millington NAS Naval Hosp	
16530316	16530316	Lyster Ar Com Hosp	
16530450	16530450	Noble Ar Com Hosp	
16530525	16530525	Fox Ar Com Hosp	
16530735	16530735	Maxwell AFB USAF Hosp	
16540060	16540060	Keesler Med Cen	
16540204	16540204	Columbus AFB USAF Hosp	
16630195	16630195	Leonard Wood Ar Com Hosp	
6631295	16631295	Whiteman AFB USAF Hosp	

MIN LENGTH:	1 MAX LENGTH:	GTH: 26 NUMBER OF VALUES: 1: 40 DEFAULT LENGTH 26 FUZZ:	
  START 	END	LABEL	(CONT'D)
  6640251	6640251	Grand Forks AFB USAF Hosp	
6640335	6640335	Minot AFB USAF Reg Hosp	
6650505	6650505	Ellsworth AFB USAF Hosp	
6660730	6660730	Ehrling Bergquist Hosp	
6670230	6670230	Munson Ar Com Hosp	
6670250	6670250	Irwin Ar Com Hosp	
6671140	6671140	McConnell AFB USAF Hosp	
6710057	6710057	Blytheville AFB USAF Hosp	
6710313	6710313	Little Rock AFB USAF Hosp	
6720060	6720060	England AFB USAF Hosp	
6720241	6720241	Bayne-Jones Ar Com Hosp	
6720870	6720870	Barksdale AFB USAF Hosp	
6730025	6730025	Altus AFB USAF Hosp	
6730385	6730385	Tinker AFB USAF Hosp	
6730410	6730410	Reynolds Ar Com Hosp	
6730835	6730835	Tinker AFB USAF Hosp	
6740033	6740033	Dyess AFB USAF Hosp	
6740210	6740210	Bergstrom AFB USAF Hosp	
6740780	6740780	Corpus Christi NAS NavHosp	
6741138	6741138	Laughlin AFB USAF Hosp	
6741320	6741320	Wm Beaumont Ar Med Cen	
6741375	6741375	Darnall Ar Com Hosp	
6741380	6741380	Brooke Ar Med Cen	
6741485	6741485	Carswell AFB USAF Reg Hosp	
6742378	6742378	Reese AFB USAF Hosp	
6743125	6743125	Wilford Hall Med Cen	
6743765	6743765	Sheppard AFB USAF Reg Hosp	
6810255	6810255	Malmstrom AFB USAF Hosp	
6820235	6820235	Mountain Home AFB USAF Hos	
6830055	16830055	F.E. Warren AFB USAF Hosp	
6840090	16840090	Evans Ar Com Hosp	
6840310	16840310	Fitzsimons Ar Med Cen	
6840945	16840945	USAF Academy Hosp	
6850005	16850005	Holloman AFB USAF Hosp	
6850075	6850075	Kirtland AFB USAF Hosp	
6850155	6850155	Cannon AFB USAF Hosp	
6860030	16860030	Williams AFB USAF Hosp  Raymond Bliss Ar Com Hosp	
6860095	16860095	Luke AFB USAF Hosp	
6860300	6860300 	Davis-Monthan AFB USAF Hos	
6860515	6860515  6870005	Hill AFB USAF Hosp	
6870095	16870095	Nellis AFB USAF Hosp	
6880063	6880063  6010120	Bremerton Naval Hosp	
6910120	6910120  6910443	10ak Harbor Naval Hosp	
6910443	102104+2	Tody Harbor Harar Hosp	

6911003	   MIN		AHACDFM LENGTH: AX LENGTH: 40	26 NUMBER OF VALUES: 1 DEFAULT LENGTH 26 FUZZ:	29
6911030	START	END	LA	BEL	(CONT'D)
6932033         6932033         Edwards AFB USAF Hosp           6932250         6932250         Oakland NS Naval Hosp           6932270         Camp Pendleton Naval Hosp           6932625         6932625         March AFB USAF Reg Hosp           6932700         Mather AFB USAF Hosp           6932840         San Diego Naval Hosp           6932970         Letterman Ar Med Cen           6933845         6933845         George AFB USAF Hosp           6940055         Elmendorf AFB USAF Hosp           6950410         Bassett Ar Com Hosp           6950410         Tripler Ar Med Cen           699         99	6930235   6930235   6930735   6930760   6931310   693137   6931885   6931925   6932270   6932270   6932270   6932840   6932970   6933845   6940055   6940066   6950410	69110	030   Ma 235   We 735   Da 760   Si 186   Le 310   Va 371   Lo 885   Be 925   Ca 033   Ed 250   Oa 270   Ca 625   Ma 700   Ma 840   Sa 970   Le 845   Ge 055   El 066   Ba 410   Tr	digan Ar Med Cen ed Ar Com Hosp vid Grant Med Cen las B. Hays Ar Com Hosp moore NAS Naval Hosp ndenberg AFB USAF Hosp ng Beach NS Naval Hosp ale AFB USAF Hosp stle AFB USAF Hosp wards AFB USAF Hosp wards AFB USAF Hosp wards AFB USAF Hosp mp Pendleton Naval Hosp rch AFB USAF Reg Hosp ther AFB USAF Resp n Diego Naval Hosp tterman Ar Med Cen orge AFB USAF Hosp mendorf AFB USAF Hosp mendorf AFB USAF Hosp ssett Ar Com Hosp ipler Ar Med Cen	